

**REMARKS/ARGUMENTS**

In the interest of expediting the prosecution of this case, the Applicant has drafted new claims clarifying the claim language and focusing on a single feature that is believed to be novel over the known prior art including the art cited by the Examiner.

Specifically, the Applicant has now provided a limited set of corresponding apparatus and method claims directed to an electronic healthcare database using multiple interface programs to manage the data of the healthcare database. The interface programs, for example, allow scheduling patient appointments, entering patient demographic data or clinical documentation with respect to patient visits, billing patients, and clinical order entry.

Per the new claims, when a new interface program is opened, it is initialized according to the electronic healthcare data being reviewed by other interface programs. An example of this initialization can occur when records for a given patient are being reviewed by the appointment scheduling interface program and a new interface program for entering patient data is opened. In this case, the new interface program is initialized to access records for the same patient as that currently being scheduled. This ability to be "aware" of open records greatly simplifies management of patient data.

Support for the limitations of the new claims is found in numerous places in the application, for example, paragraph [0020] where it states:

Upon selection of an activity, the activities database 26 is queried to determine which information is needed to run that particular activity, for example which program identifications and data requirements, step 52. In step 54, the information provider is requested to call the appropriate services for transferring the data needed for the particular activity to start up... Additionally the information provider may determine data using other activities open within the work space. For example, where a new activity requires a patient identification to open, the information provider may determine the patient identification from other activities open within the work space.

Additional support for these claim limitations are found in paragraphs [0025] and [0036].

As noted by the Examiner, programs that are initialized according to some kinds of context data are well known. The cited IBM reference seems to provide for an initialization process that is aware of the identity of the user operating the program and the user's role within an organization. One can think of other examples of context aware initialization processes, for example, the Windows® operating system that "personalizes" the initialization of the Windows workspace according to the name of the person logging on to the computer. The initialization affects the color, background image, and the availability of programs. Programs that initialize themselves based on date or time or location or the last opened file are also known.

In contrast, however, the present invention provides context data that is based not on the particular program being opened nor the identity of the user opening the program, but instead on the particular records of a database being accessed by other open programs. It is believed that this expressly claimed feature is novel over the prior art.

Other important features of the present invention that are believed to be independently novel are found in dependent claims 98 and 109 which claim limiting the range of the searching for context data to open activities with given workspaces. So, for example, two workspaces may be each assigned to separate patients so that a new activity opened in the first workspace looks only at activities in the first workspace and is not confused by the presence of records for different patients. This further serves to prevent users, who are working with multiple patients simultaneously, from accidentally from taking action on the wrong record.

The invention considers the possibility that this record-based context can be supplemented by additional input from the user and further review of the electronic healthcare database per dependent claims 104, 105, 116 and 117. Features of modularity, that is, allowing new activities to be added after the fact to the system and the ability to provide shared common elements for the different interface programs are claimed in dependent claims 106 and 107.

The Applicant has tried to draft the claims with plain language that would be understood to the public without undue reference to the specification; however, the Applicant is open to changes that the Examiner believes would make the claims and their intended coverage as described herein clearer. The Applicant therefore encourages the Examiner to contact the undersigned if there is any ambiguity or matters of form that could be addressed by a telephone conference so as to expedite this prosecution.

Please charge any fees due to Deposit Account No. 17-0055.

Respectfully submitted,

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